## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE 210 OF			;	366		
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	×	11a		11b		11c		12			
_ common common, cogo		13		14		15		16		17	

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Andrew W Piasecki MD  Mailing Address 1112 Mill St  City Camden  FEC ID number of contributing federal political committee.  Name of Employer Camden Bone & Joint  Receipt For: Primary Other (specify)	State Zip Code SC 29020-3712  C  Occupation Orthopaedic Surgeon  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  02 15 2012  Transaction ID: A6152B01ABEA148E4B74  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Richard Mills Roberts MD  Mailing Address 2120 N MacArthur Blvd Ste  City Irving  FEC ID number of contributing federal political committee.  Name of Employer IOSM  Receipt For: Primary Other (specify)	State Zip Code TX 75061-2260  C  Occupation Orthopaedic Surgeon  Aggregate Year-to-Date ▼  1000.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Kenneth Sabbag MD  Mailing Address 800 S Raymond St Ste 300  City Pasadena  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Receipt For:  Primary General Other (specify)	State Zip Code CA 91105-3256  C  Occupation Orthopaedic Surgeon  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2250.00
TOTAL This Period (last page this line number	er only)	